

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ALTERED PROTEIN EXPRESSION IN HYPOXIC TROPHOBLASTS

the specification of which (check only one item below):

is attached hereto.

was filed as United States application

Serial No. \_\_\_\_\_

on \_\_\_\_\_

and was amended

on \_\_\_\_\_ (if applicable).

was filed as PCT international application

Number PCT/US96/05441

on April 18, 1996

and was amended under PCT Article 19

on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (If PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
US	08/423,409	April 18, 1995	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

01/05/98 MON 11:08 FAX 415 576 0300 TOWNSEND SF  
Application and Power of Attorney (Continued)  
(Includes Reference to PCT International Applications)

TOWNSEND SF

ATTORNEY'S DOCKET NUMBER  
02307E-06001QUS

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT  
UNDER 35 U.S.C. 120:

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (Use name and registration number)

Kenneth A. Weber, Reg. No. 31,677  
Tom Hunter, Reg. No. 38,498

Send Correspondence to: Tom Hunter Townsend and Townsend and Crew LLP Two Embarcadero Center, 8th fl San Francisco, CA 94111			Direct Telephone Calls to: Name and telephone number: Tom Hunter 415-576-0200
201	FULL NAME OF INVENTOR	FAMILY NAME <b>FISHER</b>	FIRST GIVEN NAME Susan
	RESIDENCE & CITIZENSHIP	CITY San Francisco	STATE OR FOREIGN COUNTRY California
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1347 4th Avenue	CITY San Francisco
202	FULL NAME OF INVENTOR	FAMILY NAME <b>GENBACEV</b>	FIRST GIVEN NAME Olga
	RESIDENCE & CITIZENSHIP	CITY Mountain View	STATE OR FOREIGN COUNTRY California
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 1050 Crestview Drive #45G	CITY Mountain View
203	FULL NAME OF INVENTOR	FAMILY NAME <b>FOULK</b>	FIRST GIVEN NAME Russell
	RESIDENCE & CITIZENSHIP	CITY Reno Pacifica	STATE OR FOREIGN COUNTRY California
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 740 Alta Vista Maxfl	CITY Reno Pacifica

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE 11/6/98
MFCR/ABW/CND/DEC/WP 7/88		

Combined Declaration For Patent and Power of Attorney (Continued)  
 (Includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER  
 02307E-060010US

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
<b>PCT APPLICATIONS DESIGNATING THE U.S.</b>				
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

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Kenneth A. Weber, Reg. No. 31,677  
 Tom Hunter, Reg. No. 38,498

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201	FULL NAME OF INVENTOR	FAMILY NAME <u>FISHER</u>	FIRST GIVEN NAME <u>Susan</u>
	RESIDENCE & CITIZENSHIP	CITY <u>San Francisco</u>	STATE OR FOREIGN COUNTRY <u>California</u>
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	FULL NAME OF INVENTOR	FAMILY NAME <u>GENBACEV</u>	FIRST GIVEN NAME <u>Olga</u>
203	RESIDENCE & CITIZENSHIP	CITY <u>Mountain View</u>	STATE OR FOREIGN COUNTRY <u>California</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>1050 Crestview Drive #45G</u>	CITY <u>Mountain View</u>
204	FULL NAME OF INVENTOR	FAMILY NAME <u>FOULK</u>	FIRST GIVEN NAME <u>Russell</u>
	RESIDENCE & CITIZENSHIP	CITY <u>Pacifica</u>	STATE OR FOREIGN COUNTRY <u>California</u>
POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>740 Alta Vista</u>	CITY <u>Pacifica</u>	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE <u>5/12/87</u>	DATE <u>6/Genbacev - Wtfoulk</u>	DATE

01/05/98 MON 11:01 FAX 415 578 0300

TTC

204	FULL NAME OF INVENTOR	FAMILY NAME <u>CLAUSER</u>	FIRST GIVEN NAME Karl	SECOND GIVEN NAME R.
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205	POST OFFICE ADDRESS	POST OFFICE ADDRESS 3200 Treetops Circle	CITY San Bruno	STATE & ZIP CODE/COUNTRY California 94066
	FULL NAME OF INVENTOR	FAMILY NAME <u>BURLINGAME</u>	FIRST GIVEN NAME Alma	SECOND GIVEN NAME L.
206	RESIDENCE & CITIZENSHIP	CITY Sausalito <i>CA</i>	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 26 Alexander Avenue	CITY Sausalito	STATE & ZIP CODE/COUNTRY California 94965
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>				
SIGNATURE OF INVENTOR 204 <i>Karl R. Clauser</i>	SIGNATURE OF INVENTOR 205		SIGNATURE OF INVENTOR 206	
DATE 1/15/98 MFC/PMB/COMDEC/WF 7/85	DATE	DATE		

204	FULL NAME OF INVENTOR	FAMILY NAME CLAUSER	FIRST GIVEN NAME Karl	SECOND GIVEN NAME R.
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205	FULL NAME OF INVENTOR	FAMILY NAME BURLINGAME	FIRST GIVEN NAME Alma	SECOND GIVEN NAME L.
	RESIDENCE & CITIZENSHIP	CITY Sausalito	STATE OR FOREIGN COUNTRY California	COUNTRY OF CITIZENSHIP US
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 26 Alexander Avenue	CITY Sausalito	STATE & ZIP CODE/COUNTRY California 94965
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
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SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206		
DATE	1/15/98	DATE		

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